Request For Continued Examination (RCE) Transmittal

Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

	Application Number	10/611,551		
	Filing Date	June 30, 2003		
	First Named Inventor	Susan I. Shelso 3731 5002		
	Group Art Unit			
	Conf No.			
	Examiner Name	Melanie R. Tyson		
	Attorney Docket Number	10527-794001		

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

Submission required under 37 C.F.R. §1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s) a. Previously submitted. If a final Office action is outstanding, any amendment filed after the final Office action may be considered as a submission even if this box is not checked.						
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on ii. Other						
b. 🛛 Enclosed	•					
i. 🛛 Amendment/Reply	iii.	\boxtimes	Information Disclosure Statement (IDS)			
ii.	iv.		Other			
Miscellaneous a. Suspension of action on the above-identified application i period of months. (Period of suspension shall no b. Other	37 C.F.R. §1.103(c) for a Fee under 37 C.F.R. §1.17(i) required)					
3. Fee The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. <u>06-1050</u>						
i. 🛛 RCE fee required under 37 CFR 1.17(e)						
ii. Extension of time fee (37 CFR 1.136 and 1.17)						
iii. Other Any deficiencies						
b. Check in the amount of \$ enclosed						
c. Payment by credit card (Form PTO-2038 enclosed)						
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED						
Name (Print/Type) Michael R. Hamlin A Registration No. (Attorney/Agent) 54,149						
Signature / / /	Date	<u>`</u>	5+15 2007			